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INFLUENCE OF ROUTE OF INFECTION AND OTHER FACTORS ON GROWTH AND DISTRIBUTION OF LISTERIA MONOCYTOGENES IN ORGANS OF MICE

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ABSTRACT

SILVERMAN, SIDNEY J. (U.S. Army Biological Laboratories, Fort Detrick, Frederick, Md.), LYNN P. ELWELL, AND JAMES F. DRAWDY. Influence of route of infection and other factors on growth and distribution of Listeria monocytogenes in organs of mice. J. Bacteriol. 86:355-362. 1963.—The growth of Listeria monocytogenes in the lungs, liver, spleen, brain, and blood of mice was observed after infection by the respiratory, intravenous, and intraperitoneal routes. The lungs of mice exposed to Listeria aerosols contained about 106 infected cells per ml within 24 hr, and the number of organisms remained high for at least 9 days. After exposure by the other two routes, fewer organisms appeared in the lungs. The colony counts of organisms in spleen and liver homogenates were similar regardless of the route. Organisms were found sport dically in the brain and blood. When a cell extract of Listeria was injected simultaneously with the organisms, greater numbers of Listeria were found in spleen and liver than when the bacteria were injected alone. On the other hand, the BCG strain of Mycobacterium tuberculosis enhanced the resistance of the mice, as shown by the recovery of fewer organisms from tissues when compared with tissues from mice receiving L. monocytogenes alone. Prior administration of BCG also reversed the effect of the Listeria extract. Mice (5 to 6 weeks old) born of Listeria-infected mothers were infected with the homologous organism by the intraperitoneal route. Fewer organisms were recovered and the gross pathology was less extensive than in infected progeny of healthy females. However, there was no difference in the LT50 (time to death for 50% of the animals) between

the two groups. In a similar experiment, using 7to 8-week-old mice born of infected and healthy mothers, there was no difference in the bacterial counts, gross pathology, or LT50 between the two groups.

Although the pathology of listeriosis has been studied by numerous authors (see review by Seeliger, 1961), the dissemination of the organism throughout the host has been observed only indirectly. In a recent report, Kautter et al. (1963) showed that differences occurred in the results of virulence titrations of Listeria strains when the route of infection was varied. Although exposure by the respiratory route resulted in a reproducible linear dose response, titrations performed via the intravenous or intraperitoneal routes gave erratic. nonlinear results.

Silverman, Elwell, and Kautter (1961) observed that injection of a cell extract of Listeria. the so-called mortality-enhancing factor (MEF). reduced the resistance of mice and other animals to Listeria as well as to other microorganisms. Mycobacterium tuberculosis BCG, on the other hand, increased the resistance of mice to listerial infection and overcame the effect of MEF.

Because of the difference in response after aerosol exposure and after infection by the other routes, it seemed of interest to determine the fate of Listeria in the various organs and at intervals after exposure by these routes. In addition, it was considered desirable to determine the effect of the previous history of the host on the growth of the microorganism in various tissues known to be the loci of infection.

MATERIALS AND METHODS

L. monocytogenes strain A4413, isolated at the *Communicable Disease Center, Atlanta, Ga., niversity of New Hampshire, 1900 East 4th Ave., Highesh from a fatal injection in a constant the Present address: 1690 East 4th Ave., Highesh from a case of listerial meningitis at The

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Johns Hopkins Hospital, were used. When injected into Swiss-Webster mice by the intraperitoneal route, 4.8×10^2 cells of strain A4413 and 1.4×10^5 cells of strain JHH were required to kill 50% of the mice within 15 days (LD50). By the respiratory route, the LD50 for A4413 was 3.5×10^3 cells and that for JHH was 2.1×10^4 cells. Brain Heart Infusion broth (Difco) was inoculated with the growth from an 8-hr Tryptose Agar (Difco) slant and incubated at 37 C for 16 to 18 hr on a reciprocating shaker (4- to 5-in. stroke, 100 excursions per min). Suitable dilutions were prepared in 1% Tryptose solution; the bacterial count of the inoculum was determined by quantitative plating on Tryptose Agar.

Swiss-Webster mice from the Fort Detrick colony were used. Animals were maintained and used in compliance with the principles established by the National Society for Medical Research (1961). Intravenous injections were performed via the caudal tail vein; 0.1 ml contained the challenge dose. Respiratory exposure was made in a modified Henderson apparatus according to the procedures described by Roessler and Kautter (1962). The usual volume injected for intraperitoneal challenge was 0.2 ml. Animals were killed at intervals after exposure by anesthesia either with chloroform or in an atmosphere of CO₂. Blood was obtained from the jugular vein and cultured in Brain Heart Infusion broth; serial dilutions of the blood were prepared in this medium to determine the highest dilution at which growth would occur.

The spleens, livers, lungs, and brains were removed aseptically, and the volume of each was determined by displacement. In some experiments, similar organs from animals killed at the same time were pooled. In most cases, however, each organ was cultured separately. The tissues were ground aseptically with a glass rod and sand in a thick-walled tube. The tissue homogenate was diluted with 1.0% Tryptose and plated or Tryptose Agar plates by the method of Miles and Misra (1938). A portion (0.002 ml) of the dilution was dropped on the surface of dried Tryptose Agar from a 0.2-ml pipette with 0.01-ml gradations. After the drop vas absorbed into the agar, the plates were inverted and incubated for 18 to 24 hr. Each dilution was replicated six times, and results were based on the mean count of the drops containing 10 to 40 colonies. Results were expressed as number of organisms per ml of tissue. In some experiments when the mean weight of the organ was determined, results were expressed as number of colonies per mg of tissue. When individual organs were cultured, results were expressed as the geometric mean of counts obtained with three to five specimens.

When the effect of MEF of Listeria was studied, 2 ED₅₀ doses of MEF (Silverman et al., 1961) were injected simultaneously with doses of the infecting organism. M. tuberculosis BCG was grown for 7 to 10 days in Dubos' medium. The cells were centrifuged, washed once with saline, and from 10^5 to 5×10^5 viable units were injected into the peritoneal cavity 4 to 7 days before infection with Listeria.

The LT₅₀ (time to death for 50% of the animals) was calculated by the method of Litchfield (1949).

RESULTS

Mice, 2, 3, and 4 weeks old, were infected by the intravenous route with approximately 400 to 1,600 cells of strain A4413. Groups of three animals were killed at 24-hr intervals, and similar organs from the three animals were pooled for study. No difference was noted in the response of the three age groups, and this factor was not considered in the remainder of the study. The *Listeria* count in the lungs remained quite low (Table 1) but was not quantitatively reliable because of the heavy growth of other organisms in the low dilutions plated. However, few or no colonies of *Listeria* were present even on plates without contaminants.

Listeria strain A4413 multiplied more rapidly in the lungs after exposure by the respiratory route than after intraperitoneal injection. In replicate experiments, the maximal colony count after intraperitoneal injections ranged from 3.0×10^4 to 2.5×10^6 per ml and appeared between the first and sixth days. After respiratory exposure with this strain, the colony counts 1 day after exposure reached 1.9×10^6 to 3.7×10^6 per ml and persisted at a high level for the duration of the experiment. The maximal count (1.9×10^6) was reached at about 5 to 6 days and was greater than that observed after exposure by either the intravenous or intraperitoneal route.

The colony counts of *Listeria* obtained with homogenates of spleen or liver of infected mice were similar, regardless of the route of infection, within the wide range observed among the individual animals (Table 1).

The data in Table 2 indicate that less variation

TABLE 1. Distribution of Listeria monocytogenes A4418 in organs of mice infected by various routes

	Colony count per ml of tissue(geometric mean)														
Exposure route*		Day													
	1	2	3	4	5	6	7	8	9						
Lung															
Respiratory	2.8 × 10 ⁶	1.7 × 10 ⁶	1.2 × 10 ⁷	$\begin{vmatrix} 3.1 \\ \times 10^7 \end{vmatrix}$	1.9 × 108	9.8 × 10 ⁷	8.7 × 10 ⁶	2.4 × 10 ⁵	8 9 × 10°						
Intraperitoneal	$\begin{array}{c} 6.2 \\ \times 10^2 \end{array}$	9.0 × 10 ⁵	1.4 × 10 ⁵	2.2 × 10 ⁴	1.8 × 10 ⁴	9.1 × 10 ²	7, 13								
Intravenous	0†	+	+	+	0	0	+	+							
Liver				 				; 							
Respiratory	$\begin{array}{c} 5.4 \\ \times 10^3 \end{array}$	105	7.0 × 104	4.7 × 10 ⁶	6.9×10^7	1.3 × 10 ⁷	7.9 × 10 ⁵	<103	5.8 × 106						
Intraperitoneal	1.2 × 10 ⁴	4.9 × 10 ⁵	4.7 × 10 ⁵	1.5 × 10 ⁵	5.4 × 10 ⁴	1.3 × 10 ³		5.7 × 10 ²	7 10						
Intravenous	3.3 × 10 ⁵	7.0 × 10 ³	1.8 × 10 ⁴	1.7 × 10 ⁵	1.1 × 10 ⁶	2.3 × 10 ⁴	8.1 × 10 ⁶	1.1	<u> </u> 						
Spleen								1	<u> </u>						
Respiratory	9.7	7.8	7.9	9.4	3.0	6.0	6.3	4.0	102						
Intraperitoneal	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{array}{ c c c } \times 10^5 \\ 7.4 \end{array}$	$\begin{array}{c} \times 10^{6} \\ 5.2 \end{array}$	× 10 ⁶ 8.1	$\begin{array}{c} \times 10^7 \\ 1.5 \end{array}$	X 10 ³ 6.4	× 10 ³	× 10¹ 4.3							
Intravenous	$\begin{array}{c} \times 10^4 \\ 6.6 \end{array}$	× 10 ⁶ 5.9	× 10 ⁶ 9.3	× 10 ⁵ 6.5	X 10 ¹ 1.1	$\begin{array}{c} \times 10^3 \\ 1.3 \end{array}$	1.3	$\begin{array}{c} \times 10^2 \\ 4.0 \end{array}$							
	× 10 ⁵	× 103	× 10 ⁵	× 10 ⁶	× 10 ³	× 10 ⁴	$\times 10^3$	× 10 ²							

^{*} Respiratory dose was 1.2×10^3 cells, intraperitoneal dose was 1.5×10^3 cells, and intravenous dose was 1.6×10^3 cells. Five animals per group were used.

TABLE 2. Variations in colony counts in tissues from individual animals infected by respiratory or intraperitoneal route with Listeria monocytogenes A4413

Route* Organ Respiratory Lung Liver Spleen				Colony count	per ml o	f tissue (geomet	ric mean)								
	Ozen	Day													
	()/BEII	1		3		5		7							
		Mean	SD†	Mean	SD	Mean	SD	Mean	SD						
	3.0×10^{6} 4.5×10^{2} 1.1×10^{3}	2.4 1.02 1.0	1.9 × 10 ⁶ 6.3 × 10 ⁶ 2.0 × 10 ⁶	1.1 2.8 1.5	1.9×10^{7} 2.5×10^{8} 2.1×10^{3}		1.3×10^{4} 2.1×10^{6} 1.3×10^{4}	11.1 34.8 2.7							
Intraperito- neal	Lung Liver Spleen			6.1 × 10 ⁴ 7.9 × 10 ⁴ 3.7 × 10 ⁴	4.7 21.4 4.0	3.6×10^{4} 2.3×10^{4} 3.6×10^{3}	632.4	1.6×10^{3} 1.6×10^{3} 8.1×10^{2}	8.6 496.0 11.5						

^{*} Respiratory dose was 4.8 × 10³ cells; intraperitoneal dose was 1.1 × 10³ cells. Five animals per group were used.

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[†] Growth of other organisms in cultures from lungs made quantitative results unreliable.

[†] Standard deviation, Mean/sp = lower limit of distribution; mean × sp = upper limit.

was observed in the colony counts of tissues from mice exposed by the respiratory route than in those obtained from tissues from animals challenged by the intraperitoneal route. The standard deviation from the mean ranged from 1.0 to 34.8 colonies with cultures obtained from animals exposed by the respiratory route. With cultures of organs from mice exposed by the intraperitoneal route, the standard deviation was as high as 632.

In the experiments in which the mice were challenged via the intraperitoneal route, the *Listeria* counts in the organs of those mice receiving 1.5×10^5 cells of strain A4413 reached a maximum within 1 to 3 days (Table 3). The maximal counts in the organs of mice receiving smaller doses (2 \times 10^2 or 1×10^3 cells) did not occur until the fifth or sixth day. There was some suggestion that the lower challenge doses resulted in a somewhat

TABLE 3. Influence of size of challenge dose on numbers of Listeria monocytogenes in organs of mice after intraperitoneal challenge

	3	Maximal colony count per ml of tissue (geometric mean)												
Challenge cells per dose*	Lung		Live	r	Spleen									
	Colonies per ml	Day	Colonies per ml	Day	Colonies per ml	Day								
2.4 × 10 ²	2.5 < 10 ² × 10 ⁶		1.3 × 10 ⁷	6	1.2 × 10*	5								
1.1 × 10 ³	1.2 × 10 ³	6	3.4 × 10 ⁶	6	4.6 × 10 ³	6								
1.5 × 10 ⁵	9.0 × 10 ³	2	4.9 × 10 ⁶	2	7.4 × 10 ⁶	2								
1.5 × 10 ³	3.0 × 10 ⁴	1	6.4 × 10 ⁴	. 2 '	5.7 × 10 ⁵	3								

[•] Five mice per group were used.

higher maximal count than was obtained with larger doses.

Listeria were isolated from the brain homogenates sporadically, regardless of the reute of infection. About 25% of the brains cultured contained Listeria. A few gave rise to colonies by the first day after injection, and Listeria were found through 7 days. The greatest number of positive cultures were obtained on the fourth day. The number of colonies ranged from 5.0×10^4 to 3.0×10^6 per ml of tissue.

Positive blood cultures were obtained from the first through the twelfth day. The greatest number of positive cultures were obtained from samples taken on the second through fourth days. Growth was obtained in dilutions as high as 10⁻⁴ at around the fifth day, although *Listeria* were generally found only at lower dilutions and during the early stages of infection.

Injection of the mortality-enhancing factor simultaneously with L. monocytogenes by the intraperitoneal route resulted in increased in vivo growth of the organism. The difference between the bacterial counts of animals receiving both MFF and Listeria and those receiving only the bacteria was apparent at 4 hr and persisted for the duration of the experiment (Table 4). Most animals that received MFF were dead by the fourth day.

BCG injected 6 days before challenge with Listeria increased the resistance of the mice so that the bacterial counts obtained from the tissue homogenates were lower than those obtained from the organs of animals receiving Listeria alone (Table 5). Listeria were not recovered from the blood of mice injected with BCG. Blood cultures were positive from most mice injected with Listeria only, BCG was also capable of over-

TABLE 4. Effect of injection of mortality-enhancing factor (MEF) on growth of Listeria monocytogenes JHH in organs of mice

		Colony o	ount per	ml of tissue (geor	netric mean)						
	Expt 1 chr) ···		Expt 2 (hr)							
•	12	24	24	48	72	46					
	**			**	**	-					
1.1	1.7	8.1	2.9	95	25	4.7					
0	200	57	8.2	3.5×10^4	2.7×10^{4}	1.6×10^{44}					
1.1	2.0	14	3.0	43	100	6.8					
40	17	59	9.1	7.0×10^4	1.8×10^4	6.5×10^{3}					
	1.1 0 1.1	1.1 1.7 0 200	Expt 1 chr) 4 12 24 1.1 1.7 8.1 0 200 57 1.1 2.0 14	Expt t (hr) 4 12 24 24 1.4 1.7 8.1 2.9 0 200 57 8.2 1.1 2.0 14 3.0	Expt 1 (hr) 4 12 24 24 48 1.1 1.7 8.1 2.9 95 0 200 57 8.2 3.5×10^4 1.1 2.0 14 3.0 43	$\begin{array}{cccccccccccccccccccccccccccccccccccc$					

^{*} Dose in experiment 1 was 4.5 × 10³ cells; dose in experiment 2 was 4.6 × 10³ cells.

[†] Only one animal survived at this time.



TABLE 5. Influence of prior injection of BCG on growth of Listeria monocytogenes JHH in organs of mice

		Cole	ony count per n	ng of tissue (geo	metric mean)								
Inoculum'	Day												
	1	2	3	4	5	6	. 7						
Lung													
JHH ^b	8.5×10^{5}	5.9×10^{5}	2.1×10^{5}	310	8.9×10^{4}	920	1,600						
$JHH + BCG^c$	<690	1,100	1,800	<300	<400	190	<340						
Liver		; [1	! i	1						
JHH	3.3×10^{4}	5.9 × 10 ⁵	1.2×10^{5}	4,200	2.0×10^{5}	1.9×10^{5}	3.900						
JHH + BCG	<200	460	2,700	90	<42	420	<81						
Spleen		 			i :	1	:						
јнн	1,600	1.2×10^{7}	1.3×10^6	7.7×10^{4}	3.6×10^{5}	1.5×10^{4}	2,000						
JHH + BCG	<1,000	890	1.1×10^5	í.	110	3,700	<360						
Blood	ı		<u> </u> 	! !	i ·								
JHH	$2/3^d$	3/3	2/3	0/3	1/3	2/3	0/3						
JHH + BCG	0/3	0/3	0/3	0/3	0/3	0/3	0/3						

^a Three mice per group were used.

TABLE 6. Effect of prior injection of BCG on in vivo growth in mice of Listeria monocytogenes

JHH in the presence of mortality-enhancing factor (MEF)

	1					C	olony	cou	nt pe	r ml	of t	issue	(geor	netr	ic me	an)						
Inoculum ^a											Da	У										
		1			2			3			4			5			6	•			;	
Liver				!	•					1												
JHH + MEF*	3.5	X	103	7.3	×	103	1.2	×	107	2.0	×	105	5.2	X	103	6.3	X	101	4.	5 >	<	104
JHH + MEF + BCG ^c	1.8	×	104	2.7	×	104	4.0	×	104	8.2	X	103	8.7	×	104	1.1	×	103	3.	0 >	<	102
Spleen	1			ì																		
JHH + MEF	1.2	×	104	5.1	×	104	6.1	×	101	5 .3	X	104	2.0	×	102	2.0	×	10^{4}	3.	8 >	<	104
JHH + MEF + BCG	7.0	X	104	1.5	×	104	2.8	×	10,	4.4	X	102	1.2	×	10,	4.8	×	10,	1.	4 >	<	102
Blood				:						•												
JHH + MEF		0, 3	}4		3/3	ł		3/3	ł		1,	3		1 -	3		0.	3		1	.2	
JHH + MEF + BCG	ī	0 ::	š		1:	}		1	ł		10	3		2/	3		0.	3		0	3	

^{*} Three animals per group were used.

^b Inoculum: 7.3×10^4 cells per 0.2-ml dose.

^c Inoculum: 9.1×10^4 living BCG cells were injected into the peritoneal cavity 6 days before challenge with L. monocytogenes.

^d Number of animals showing positive blood cultures/total number when one loopful of heart blood was streaked on a Tryptose Agar plate.

^{*}Strain JHH (6.7 \times 10° cells) was injected by intraperitoneal route simultaneously with 2 ED₂₀ amounts of MEF.

[←] BCG (9.1 × 10⁴ living cells) was injected into peritoneal cavity 6 days prior to challenge.

⁴ Number of positive blood cultures total number plated.

TABLE 7. Comparison of growth of Listeria monocytogenes A4413 in organs of mice born of Listeria-infected mothers and of mice born of healthy mothers

<u>.</u>													
			Colony count pe	er mg of tissue (g	ometric mean)								
Mouse litter	Organ	gan Days											
		1	2	3	4	5							
Mice 5 to 6 weeks old, from:*													
Infected mother	Liver	410	550	6,500	3,600	1,700							
Normal mother	Liver	1.4×10^4	5.7×10^4	5.4×10^{6}	3.8×10^6	4.3×10^{4}							
Infected mother	Spleen	910	380	440	6,100	1.2×10^{4}							
Normal mother	Spleen	3.5×10^{4}	3.7×10^4	7.0×10^6	6.1×10^6	9.4×10^{4}							
Mice 7 to 8 weeks old, from:†	•					_							
Infected mother	Liver	440	2.3×10^{4}	1.2×10^{4}	8.2×10^6	1.1×10^{4}							
Normal mother	Liver	920	1.5×10^4	1.2×10^{s}	2.4×10^7	$1.2 \times 10^{\circ}$							
Infected mother	Spleen	730	2.0×10^{4}	5.1×10^4	2.9×10^6	3.2×10^4							
Normal mother	Spleen	400	1.5×10^4	1.1×10^{5}	1.2×10^{5}	2.5×10^{4}							

^{*} Inoculum: 1.3 × 10³ cells per dose; three mice per group.

coming the effect of MEF, so that the number of bacteria recovered from the tissues of animals that received *Listeria*, MEF, and BCG was somewhat less than that found in the organs of mice receiving only *Listeria* strain JHH (Tables 5 and 6).

Since in utero infection of the fetuses of females infected with Listeria has been reported by numerous investigators (see Seeliger, 1961), it was considered of interest to determine the fate of the organisms in surviving mice born of infected mothers and to determine the immunological state of these animals. Pregnant mice were infected by intraperitoneal injection of approximately 3×10^5 cells of strain JHH. Of the 49 progeny born to 5 females, 27 survived and, at 5 to 6 weeks of age, were infected in the peritoneal cavity with 1.2×10^{2} cells of strain A4413. Although no significant difference in the LT20 was noted between the test group and mice of the same age from uninfected females, a marked difference was noted in both the extent of gross pathological changes and in the number of organisms recovered from spleens and livers. The LTM for mice born of infected females was 4.5 days (95%) confidence limits: 3.4 to 6.0 days); that for mice from an uninfected parent was 3.8 (95%) confidence limits: 3.0 to 4.8 days animals, however, showed much more excensive pathology, and the cell counts per ml in spleen or liver were higher (Table 7). However, in a similar experiment utilizing mice 7 to 8 weeks old, no difference was observed between the test group and the control group. The number of organisms per ml of spleen or liver tissue was essentially the same in both groups, and changes in cell population paralleled each other quite closely.

Discussion

Kautter et al. (1963) reported extensive experiments which indicated the influence of a number of factors on the lethal effect of L. monocylogenes. Among these factors were the age and physiological state of the host, the nost species, and the strain of organism used. A striking difference was observed among infections produced through different routes. Exposure by the respiratory route produced a linear dose-response curve. and the lethal dose obtained on repeated titrations was relatively constant. Exposure by the intraperitoneal or intravenous routes generally resulted in a lower lethal dose but the dose-effect response was nonlinear and erratic. The LD: in repeated titrations extended over a wide range. This difference in response to infection by the various routes is reflected in the results presented here. Infection of mice by the respiratory, intravenous, or intraperitoneal routes produced the same amount of growth of L. monocylogenes in the spleen, liver, and brain. After aerosol exposure, however, the colony counts obtained from lung suspensions were high within the first 24 hr

[†] Inoculum: 5.4×10^2 cells per dose; four mice per group for infected progeny; two mice per group of controls.

[‡] Single survivor.



after infection and remained at a high level for up to 9 days. Infection by the other routes not only resulted in a somewhat lower colony count but also in a more gradual increase in the number of *Listeria* in the lungs. The standard deviation from the geometric means of the colony count was more uniform and smaller with the cultures obtained from animals infected by acrosol than with cultures from mice infected by the other routes (Table 2).

The difference between the in vivo growth of Listeria after respiratory exposure and that after infection by the other routes also may be explained in part by unpublished observations by Kautter. He observed that, after introduction of Listeria into the lungs, there was an immediate increase in the number of organisms; 2 hr after exposure, the mean increase in Listeria was approximately 1.6 times the number present at 0 hr. and by 4 hr the bacterial count increased about fivefold. In the peritoneal cavity, however, the organisms disappeared rapidly for the first 6 hr and then began to increase (Silverman, unpublished data). In agreement with this, we have also observed that when Listeria were injected into the peritoneal cavity 24 hr after the injection of sodium caseinate, the accumulated polymorphonuclear cells rapidly ingested the organism so that within 10 to 15 min the leukocytes were completely filled with bacteria. This suggests that, in the lung, phagocytosis by cells lining the alveolar passages holds the organisms in situ and permits incacellular multiplication. The intracel' dar location of the Listeria may offer protection against the bactericidal activity of the blood observed in the guinea pig (Silverman, unpublished data). On the other hand, the organisms introduced into the peritoneal cavity or directly into the blood stream would be directly exposed to this hazard. Differences in response among the mice could reflect individual differences in the bestericidal activity of the blood such as has been observed in studies with sera from guinea pigs.

The infrequent occurrence of Listeria in brain homogenates is in accordance with the observations of various authors, Seeliger (1961) mentioned that only after intracranial or intrathecal injection was neuro-listeriosis consistently produced in rodents. He suggested that the short time interval between infection and death in septic listeriosis precludes infection of the brain.

The greater number of organisms recovered after injection of MEF was in accordance with

previous observations on the greater mortality that followed injection of the cell extract with the organism. The reverse effect induced by the prior injection of BCG and the neutralization of the effect of MEF by injection of the acid-fast organism suggests that MEF exerts its effect in part, at least, on the reticuloendothelial system. Lurie (1939) reported enhanced activity by the cells of this system during infection with Mycobacterium. The exact role of MEF in Listeria infections is yet to be elucidated. It may be, as with the toxin of plague (Meyer, 1958), that, as the host responds to the infection by destroying the organism, the cellular component (MEF) is liberated. Thus, the host indirectly enhances the infection. On the other hand, in view of the latent nature of Listeria infections (Seeliger, 1961), it may be that when resistance is reduced because of stress, and if Listeria are present in an inapparent infection, the host becomes more susceptible to the MEF produced by the organisms already present in the tissues, and an acute infection is initiated. These hypotheses require further investigation of the pathogenesis of the disease and of the role of cellular components of the parasite.

Increased resistance after injection of BCG is in accord with previous observations by Pullinger (1936), Henderson et al. (1956), Dubos and Schaedler (1957), and Sulitzeanu et al. (1962) with Brucella abortus, Bacillus anthracis, Staphylococcus aureus, and M. fortuitum. Elberg, Schneider, and Fong (1957), studying monocytes obtained from animals exposed to Mycobacterium, also observed increased resistance toward infection with Brucella.

The comparative studies with progeny of Listeria-infected females and those of healthy animals indicate that prenatal exposure of Listeria produced a temporary degree of immunity rather than a state of immune tolerance. Rees and Garbutt (1961) reported immunity in mice infected in utero with Mycobacterium. They observed a shortened survival time in their control group. Although in utero infection failed to increase the LT12, the gross pathology and bacterial growth were less extensive in this group than in the control group. The temporary nature of the immunity suggests that it may have been passive in nature.

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